



MISSOURI DEPARTMENT OF NATURAL RESOURCES
DAM AND RESERVOIR SAFETY
ATTACHMENT - CONSTRUCTION PERMIT APPLICATION

DAM NAME		ID NUMBER
COUNTY		DATE
<div><input type="checkbox"/> OWNER CERTIFICATION</div> <p>I, the undersigned, owner, whose Post Office Address is _____</p> <p>_____ Zip Code _____</p> <p>do hereby accept and approve these plans.</p>		
OWNER SIGNATURE		
<div><input type="checkbox"/> ENGINEER CERTIFICATION</div> <p>I hereby certify that these plans for the (construction of, or alteration of) the _____</p> <p>_____</p> <p>(NAME OF DAM)</p> <p>were prepared by me or under my direct supervision for the owners thereof.</p>		
NAME OF FIRM		ENGINEER'S SEAL
REGISTERED ENGINEER	P.E. NUMBER	